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Agartala, Monday, August 22, 2022 A. D. Sravana 31, 1944 S.E.

Part -- II Advertisement and notices.

AFFIDAVIT FOR TRIPURA STATE GOVERNMENT EMPLOYEE FOR CHANGE OF NAME/SURNAME

BY THIS AFFIDAVIT I the undersigned **SHIULI DEY**, W/O- Sri Parihash Biswas, D/O- Prafulla Kumar De, resident of - Chandrapur, Jamtala, P.S. East Agartala, Dist. West Tripura, by profession-Govt. Service, age about-42 years, Citizen of India, lately called **SMT. SHIULI DE** (Former name) employee as Directorate of Health and Family Welfare Department, (Designation of the post held at the time by the Govt. Servant) at Office of the Director of the Family Welfare & P.M. (place where employed in the Department/Office of the State Government) do hereby:

- Wholly renounce, relinquish and abandon on the use of my former name of SHIULI DE and in place thereof do assume from the date thereof the name of SHIULI DEY and so that I may hereafter be called, known and distinguished not by my former name of SHIULI DE but by my assumed name of SHIULI DEY.
- 2. For the purpose of evidence such my determination, declare that I shall at all times hereafter in all records, deeds and writings and in all proceedings, dealings and transactions private as well as public and upon all occasions whatsoever use and sign the name of **SHIULI DEY** as my name in place of and in substitution for my former name of **SHIULI DE**.
- 3. Expressly authorities and request all persons at all times hereafter to designate and address me by such assumed name of **SHIULI DEY.**
- 4. In witness whereof I have here unto subscribed my former and adopted name of SHIULI DE and SHIULI DEY affixed my seal this 12th day of July, 2022 before the Notary Public at Agartala Court Complex, West Tripura.

Old Signature : SHIULI DE SWILL DEY

Signed and delivered by the above .	
Named: SHIULI DEY	•
Formerly SHULL DE in the present	ce of: -
Witness No. 1	
Signature:	
Name: ANURADHA MAJUMDAR.	10
Designation: MEDICAL OFFICER	
Official Address : DFWPM reducat Office,	
(with Rubber Stamp) GrIV of T.H.S.	
Witness No. 2	
Signature:	
Name: BIPRUTIT DEBBARMAN	1 Jour
Designation: CRADE II of THS	Suga 19/200
Official Address PN COMLEX GGARTHIA	SANANDA CHAKRABORTY
(with Rubber Stamp) PIN-799006	NOTARY God, of Tripure
O/o DFW PM.	Agariala, West Tripura,
Medical Officer, GrII of T.H.S.	Regd. No47 of 2021
Govt. of Tripura,	2